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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**



Declaration  
Submitted  
With Initial  
Filing

OR



Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

USB.279

First Named Inventor

Guy LaTORRE et al.

COMPLETE IF KNOWN

Application Number

Unassigned

Filing Date

September 3, 2004

Art Unit

Unknown

Examiner Name

Unknown

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods of Treating Hair

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**DECLARATION — Utility or Design Patent Application**

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Name			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <span style="float: right;">Guy</span> (first and middle [if any])		Family Name <span style="float: right;">LaTORRE</span> or Surname	
Inventor's Signature			Date
Residence: City <span style="float: right;">Gainesville</span>	State <span style="float: right;">FL</span>	Country <span style="float: right;">US</span>	Citizenship <span style="float: right;">US</span>
Mailing Address <span style="float: right;">4416 NW 62nd Terrace</span>			
City <span style="float: right;">Gainesville</span>	State <span style="float: right;">FL</span>	ZIP <span style="float: right;">32606</span>	Country <span style="float: right;">US</span>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <span style="float: right;">Kevin</span> (first and middle [if any])		Family Name <span style="float: right;">MCKENZIE</span> or Surname	
Inventor's Signature			Date
Residence: City <span style="float: right;">High Springs</span>	State <span style="float: right;">FL</span>	Country <span style="float: right;">US</span>	Citizenship <span style="float: right;">US</span>
Mailing Address <span style="float: right;">28115 NW 182 Avenue</span>			
City <span style="float: right;">High Springs</span>	State <span style="float: right;">FL</span>	ZIP <span style="float: right;">32643</span>	Country <span style="float: right;">US</span>
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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Inventor's Signature			Date
Residence: City Gainesville	State FL	Country US	Citizenship US
Mailing Address 4416 NW 62nd Terrace			
City Gainesville	State FL	ZIP 32606	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Kevin (first and middle (if any))		Family Name MCKENZIE or Surname	
Inventor's Signature			Date
Residence: City High Springs	State FL	Country US	Citizenship US
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City High Springs	State FL	ZIP 32643	Country US
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